

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000053938

FILED
Jun 23, 2009
Secretary of State

Entity Name: DONNA B. WEXLER, S.L.P., P.A.

Current Principal Place of Business:

10625 N. MILITARY TRAIL, SUITE 207
PALM BCH GARDENS, FL 33410

New Principal Place of Business:

10625 N. MILITARY TRAIL, SUITE 207
SUITE 207
PALM BCH GARDENS, FL 33410

Current Mailing Address:

10625 N. MILITARY TRAIL, SUITE 207
PALM BCH GARDENS, FL 33410

New Mailing Address:

10625 N. MILITARY TRAIL, SUITE 207
SUITE 207
PALM BCH GARDENS, FL 33410

FEI Number: 65-1020944

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEXLER, DONNA B
10625 N. MILITARY TRAIL, SUITE 207
PALM BCH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

WEXLER, DONNA B
10625 N. MILITARY TRAIL, SUITE 207
SUITE 207
PALM BCH GARDENS, FL 33410 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

06/23/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WEXLER, DONNA B
Address: 10625 N. MILITARY TRAIL, SUITE 207
City-St-Zip: PALM BCH GARDENS, FL 33410

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DONNA B WEXLER

MRS.

06/23/2009

Electronic Signature of Signing Officer or Director

Date